

Voices for Action:
**A Focus on the
Changing Needs of
America's Veterans**



November 9, 2006

**First Edition
Benefits**



Issues Committee Sub-Committee on Benefits

Overview

Upon separation, service members and their families are not getting adequate or timely information about Federal, state and local veterans' benefits.

The Montgomery GI Bill (MGIB) was designed to meet the needs of our volunteer military by providing education and training benefits for service members as they transition into civilian life. The payment rates, processing time, program disparities and other limitations of the MGIB do not meet the needs and expectations of our veterans.

Current vocational rehabilitation educational services are not meeting the needs of all veterans and families who are entitled to them. Information about, and access to, these services are not equally provided. Proper execution of the services that are currently available is not equal or consistent.

Benefits Delivery on Discharge

1. Due to a lack of an integrated and mandatory Benefits Delivery on Discharge (BDD) policy, there is a lack of collaboration between the Department of Veterans Affairs (DVA) and the Department of Defense (DOD).
2. BDD is understaffed from the DVA and DOD standpoints.
3. BDD is not currently codified, funded, mandatory, standardized, or flexible, and BDD does not count for varied military branch and component requirements.

Board of Veterans' Appeals

4. Insufficient manpower at the Board of Veterans' Appeals (BVA) to handle the current workload and projected influx of appeals.
5. The BVA is compelled to remand too many appeals due to:
 - Inadequate compensation and pension medical examinations.
 - Lack of proper evidentiary development by regional offices.
6. Length of time for remands to return to the BVA.

Claims Backlog

7. Eliminate the backlog of compensation and pension claims at the DVA Regional Offices.

Claims Processing

8. Inadequate funding for DOD/DVA.
9. Non-standardization of physical examination by DOD and DVA.
10. Non-standard electronic system across all branches compatible with DVA.
11. Military does not have in place a system recording every occurrence of medical treatment (i.e. civilian care, repeat treatments not tracked).
12. Military waving the bone.
13. Medical records not being provided before separation.
14. Duty To Assist Letter.
15. Lack of education for military personnel on DVA benefits.

- 16. DVA loses a lot of paperwork.
- 17. Standardization within DVA ROs.

Court of Appeals for Veteran Claims

- 18. The Court of Appeals for Veteran Claims (CAVC) has not been granted the jurisdiction to review factual determinations other than on a “clearly erroneous” basis. The Court should not be required to grant deference to the Board of veteran Appeals (BVA) decision-making. The Court should be expected and required to weight the evidence de novo.
- 19. Too many cases are before the Court because of inadequate issue and evidentiary development throughout the process beginning with the filing of the claim. In FY 2005, 3,466 cases were appealed to the CAVC. CAVC decided 1,905 cases in FY 2005. 45% were remanded to the DVA. This delays the final adjudication of the claim, and puts further strain on the system. Some veterans never receive a final resolution before they die.
- 20. Multiple issues in an appeal should be reviewed individually and completely before the case is returned to BVA.
- 21. CAVC does not effectively communicate with Congress or the VA in the annual report. The report is not appropriately detailed regarding the issues that are continuously before the court.

Decision Review Officer

- 22. Inexperienced DROs are making decisions.
- 23. DROs are not accountable for the number of cases going to the BVA.
- 24. Lack of informed claimants.
- 25. Heavy DRO workload.

Functions of a Veteran Service Officer

- 26. Standard protocol for selection and hiring of Veteran Service Officers.
- 27. Education/Funding/Knowledge.
- 28. Research & Development of an electronic program for the submission of a ratable claims package to include Power of Attorney for Veteran Service Officers and all supporting documents.
- 29. The importance of collecting and utilizing information.
- 30. Mandatory funding for Veteran Service Officers based on need, not political agendas.
- 31. Service Officers should attend Family Readiness Groups.
- 32. The continuance of Symposiums dedicated to Veteran’s Affairs.

Montgomery GI Bill

- 33. Payments
 - Delayed payments are causing financial hardship to the student.
 - Payment rate-inflation and rise of cost of education are not being met with matching payment increases.
- 34. Process
 - Applications/Claims are not being processed in a timely fashion (currently taking a minimum of 11 to 13 weeks).
 - The toll-free number and “Right Now Web” are not effective.
 - Only four understaffed Regional Processing Offices (RPO) process MGIB claims.
 - School Certifying Officials (SCO) are not adequately trained to process MGIB Claims.
- 35. MGIB Limitations
 - Transferability of MGIB benefits
 - 10 year delimiting date
 - 36 months
 - Included as “income” when applying for Pell Grant
- 36. Disparity between the Select reserve and Active Duty MGIB
 - Pay rates discrepancies
 - Multiple deployment times are not cumulative for 1607
 - When 1607 claims are processed the VA system creates an overpayment | letter if the member was receiving 1606.
- 37. \$1,200 Contribution
 - Required
 - Not refundable

38. A person with a General Discharge Under Honorable Conditions is not allowed to claim GI Bill benefits.

39. Transition from military to campus life

- Study skills, age, financial, family issues and responsibilities, physical, faculty (anti-war), other student perceptions
- School support system/programs (student affairs, counselors, VA associations). Schools that do not have a VA office need to provide services.
- Not all schools react the same to late payments (promissory notes).

Transition Assistance Program

40. TAP is only available within a limited window of opportunity (180 days prior to separation) and location (only at active duty bases).

- Often transitioning veterans, whose minds are on going home, are not of a mindset to be receptive to the TAP initiative.
- Veteran demand exceeds capabilities of limited staff and resources (equipment, locations, instructors, computer based initiatives).
- Not available once separated from service.
- Lack of coordination with sister service TAP programs.
- No virtual process in place.
- Lack of command support.
- No central coordination of separating service members within a geographical area.
- TAP classes/instructors not mobile.

41. Currently there is no measuring the effectiveness of TAP in meeting the future needs of the service member.

- No formal analysis of veteran's needs.
- No follow up with veteran after separation.
- No measure of participation by components/branches.
- No measure of job placement rate.
- No definition of finished product (i.e. resume, interview skills, job search readiness).
- No national oversight of the benchmarks.
- Without verifiable data, you cannot justify solutions or make adjustments.

Vocational Rehabilitation Education

42. All levels of service providers are not consistently applying regulations based on current federal guidelines, specifically at state and local levels (i.e. inconsistent diagnosis of veterans' disabilities, program eligibility, etc).

43. Some regulations are subjectively interpreted while others are too restrictively defined to meet the current needs of veterans; timelines are restrictive; certain needs are not accounted for; and application instructions are unclear.

44. Current funding is not mandatory; caps and quotas are limiting the availability and usage of services; local resources are not adequately funded.

45. There is a lack of training and knowledge for providers and veterans on specific disabilities, program details, the appeals process, and veterans' entitlements.

46. Current programs and services fail to initially meet and continually evaluate the complex and specialized needs of veterans and families.

Issue 1

Due to a lack of an integrated and mandatory Benefits Delivery on Discharge (BDD) policy, there is a lack of collaboration between the DVA and the DOD.

Recommendation

Begin with a DVA briefing at Basic Training. This is an action item for the Departments of Defense, Homeland Security, and Veterans Affairs.

Case Manager Liaisons to deal with all issues in DVA/DOD/BDD. This is an action item for the Departments of Defense, Homeland Security, and Veterans Affairs and the Veterans Service Organizations.

Central location for all information:

DOD, Military, State Ombudsman, DVA, State and Community Support Services all linked.

This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs and state departments of veteran affairs.

DVA and DOD should partner with state departments of veteran affairs more effectively. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs and state departments of veteran affairs.

Upon serious injury or medical hold, an information packet or family assistance guide should automatically be provided to families. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Steering Committee Note: A variation of the following recommendation has been submitted as Issue 24 in the chapter on Health Care.

Enroll in DVA upon enlistment. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Steering Committee Note: The Steering Committee appreciates the work and effort expended by the members of the Benefits work groups. Although we will look at the following areas from time to time in the future, at this point we do not intend to pursue them as we feel the recommendations listed below have been resolved. Amplification is included in the rationale.

Information must be given earlier and more often. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Review at significant career touch points.

- Recruitment, Enlistment, Re-enlistment, Promotions, etc.

This is an action item for the Department of Defense.

Establish an inter-governmental partnership between DOD and DVA to standardize and share information to bridge service member records and DVA records. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs. *Steering Committee Note: This recommendation has been completed with the establishment of the DVA/DOD Joint Executive Council (JEC) chaired by the Deputy Secretary of Veterans Affairs and the Under Secretary of Defense for Personnel and Readiness. DVA/DOD Health Executive Council (HEC), chaired by the DVA Under Secretary for Health and the Assistant Secretary of Defense for Health Affairs and the DVA/DOD Benefits Executive (BEC), chaired by the DVA Under Secretary for Benefits and the Assistant Secretary of Defense for Force Management.*

Military exit physical examination should meet VA exam standards. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs. *Steering Committee Note: This has been accomplished with the issuance of a Memorandum of Agreement between the Department of Defense and the Department of Veteran Affairs, regarding separation physical examinations and compensation examinations, was executed on 17 November 2004. A copy of the MOA and amplifying instructions for local Memorandums of Understanding may be found in a VHA memorandum on Implementation of the Memorandum of Agreement on the Cooperative Separation/Process Examination dated 24 January 2005.*

Rationale

Steering Committee Note: Although we do agree with most of these recommendations, work group personnel, support staff, and veterans in general must remember that the primary mission of the Departments of Defense and Homeland Security is the protection of the United States, not the processing of veterans benefits. Basic information on all topics of interest to our military personnel is available at <http://www.va.gov/>. The service member has a responsibility to himself/herself and his/her family to do his/her own research.

Currently military basic training is conducted at four locations: Fort Leonard Wood, MO for the Army; MCRD Parris Island, SC for the Marine Corps; RTC Great Lakes, IL for the Navy; Lackland AFB, TX for the Air Force; and CGTC Cape May, NJ for the Coast Guard. DVA maintains an Outpatient Clinic at Fort Leonard Wood and Beaufort, SC; a Medical Center adjacent to RTC Great Lakes; a Medical Center in San Antonio, TX; and an Outpatient Clinic at Cape May. Only VAMC North Chicago and South Texas Veterans Health System would have Veterans Benefits Administration personnel available locally. The other three sites would require creation of positions and acquisition of office facilities.

Case Managers should be available. However, we must first understand the basics of BDD. Any service member being separated from the military is required to attend TAP. As a part of this process many of them file claims for disability

compensation with the Veterans Benefits Administration (VBA). Every BDD claim west of the Mississippi River is processed at Salt Lake City, UT and every BDD claim east of the Mississippi River is processed at Winston-Salem, NC. Case management should be available at every TAP site maintained by the DOD or DHS. This case manager could be an employee of the VBA, which is preferred, or it could be a representative of a Veteran Service Organization.

A central repository for information does not currently exist. Any VA Regional Office or VA Benefits Office can access a claimant's e-files anywhere in the VBA system. They cannot access the DOD or DHS information. That holds true for DOD and DHS staff as well. In most states, although DVA is working on a resolution, state department of veteran affairs staff may only access DVA files if they maintain an office in the VARO and have the veteran's written authority on file. In order to best serve the veteran, while he or she is on active duty and beyond, the DVA/DOD Joint Executive Council needs to discuss and resolve this issue.

The Department of Veterans Affairs and their counterparts at the state government level are partnered in numerous areas. Some state departments of veteran affairs are actually a subordinate organization under The Adjutant-General of the state, which effectively partners them with DOD through the National Guard Bureau. However, it is imperative that state departments of veteran affairs work more closely with the service human resources commands and the DVA BDD sites in Salt Lake City and Winston-Salem. It would be beneficial for state Departments of Veterans Affairs to assign staff to the BDD processing centers to assist DVA.

Issue 2

BDD is understaffed from a DOD and DVA standpoint. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Recommendation

Allocate funding for additional staff assisting the BDD program. This is an action item, with budgetary constraints, for the Department of Veteran Affairs.

Rationale

The Benefits Delivery on Discharge program is not a Congressionally mandated program. Staff for this function comes out of the Veteran Benefits Administration Veteran Service Representative personnel bank. As of 31 December 2005, VBA had a total of 6,893 personnel employed, in VA Regional Offices, in claims processing/rating. Of these 327 were located in Winston-Salem and 53 in Salt Lake City. The FY 2007 Budget Submission asked to decrease total number of Full Time Employees (FTE) in the compensation area by 149. The Chairman of the House Committee on Veteran Affairs had intended to increase the FTE by approximately 50.

Issue 3

BDD is not currently codified, funded, mandatory, standardized, or flexible and does not count for varied military branch and component requirements.

Recommendation

Caregiver Resources: provide resources and training/support for caregivers. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Universal checklist of things-to-do for members/families, with a timeline. This is an action item for the Departments of Defense and Homeland Security and the service member.

Must be offered at all military installations. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Financial Information/Counseling should be provided during BDD program:

- There should be a supplemental briefing/program made available.
- Provide specific information for DTAP and connect them to resources that could be helpful.

This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Program eligibility should automatically include those in receipt of TSGLI, MEB/PEB. This is an action item for the Departments of Defense and Homeland Security.

Make DVA responsible for educating active duty members. This is an action item for the Departments of Defense, Homeland Security, and Veteran Affairs.

Presentations should be available to families in various media forms to include CD-ROM/DVD, web-based, readings, etc. with incentives. This is an action item for the Department of Veteran Affairs.

Steering Committee Note: The Steering Committee appreciates the work and effort expended by the members of the Benefits work groups. Although we will look at the following areas from time to time in the future, at this point we do not intend to pursue them as we feel the recommendations listed below have been resolved. Amplification is included in the rationale.

Amend Title 10, United States Code, Chapter 58, Section 1142 to read:

“(b) Matters to be covered by Counseling – Counseling under this section shall include the following:

(1) A description (to be developed with the assistance of the compensation and vocational rehabilitation benefits and others to expand the BDD within DTAP and to make DTAP mandatory)...”

This is an action item for the Congress

Code of Federal Regulations for BDD program in 38 CFR. This is an action item for the Department of Veteran Affairs.

Rationale

Caregiver resources may be accessed via the Internet. The National Family Caregiver Support Program, located at <http://www.aoa.gov/prof/aoaprogram/caregiver/caregiver.asp>, is under the auspices of the US Department of Health and Human Services. This site appears to provide the information that would be needed by DOD, DHA, and DVA.

The service member and spouse, in conjunction with the Unit TAP Coordinator, VBA representative, and/or VSO representative, should build their checklist based on a combination of requirements from the DOD/DHA, the DVA, and the family needs. This really isn't an item that a government agency could, or should, do on its own.

Steering Committee Note: The Benefits Delivery on Discharge program is an in-house operation of the Veteran Benefits Administration, in conjunction with the Department of Defense. Like many programs VBA sets up to attempt to achieve a higher efficiency in the claims process, codification in Federal statute isn't necessary. BDD actually is codified in Title 38, USC, Section 510 which allows the Secretary of Veteran Affairs to “(1) consolidate, eliminate, abolish, or redistribute the functions of the Administrations, offices, facilities, or activities in the Department; (2) create new Administrations, offices, facilities, or activities in the Department; and (3) fix the functions of any such Administration, office, facility, or activity and the duties and powers of their respective executive heads.” With no real need to codify the BDD program, then there is also no reason to regulate it through the Code of Federal Regulations.

Issue 4

Insufficient manpower at the BVA to handle the current workload and projected influx of appeals.

Recommendation

Hire more judges and attorneys and a proportionate amount of support staff. Contract attorneys and legal interns to address backlog. Contracting would prove to be more economical. This is an action item, with budgetary restrictions, for the Department of Veteran Affairs.

Rationale

The DVA has requested a decrease of one Full Time Employee for BVA in its FY 2007 Budget Submission. According to the Report of the Chairman of the Board of Veteran Appeals for FY 2005, the Veterans Law Judges (VLJ) averaged 131.44 Decisions per Work Day in FY 2005, for a total of 34,175 cases decided during the year. The Chairman also reported that at the beginning of FY 2006 there were still 37,539 cases pending and an estimate of 43,000 new appeals that would be filed. Without adding additional judges, attorneys, and support staff the BVA will be unable to clear its calendar.

Issue 5

The BVA is compelled to remand too many appeals due to:

- Inadequate compensation and pension medical examinations.
- Lack of proper evidentiary development by regional offices.

Recommendation

The BVA should be pro-active in offering trend specific training to the staff at the regional offices, in order to address the remand problem. This is an action item, with budgetary restrictions, for the Department of Veterans Affairs.

Rationale

VHA Directive 2006-13 establishes policy for VHA clinicians and managers regarding the professional qualifications required to perform compensation and pension examinations for mental disorders. VHA Handbook 1601E.01 establishes procedures for administering the Compensation and Pension Examination Program. The VBA Compensation & Pension Service provides a Clinician's Guide, dated March 2002. These three directives give medical examiner ample information on how to perform the required C&P Examinations. The direction and guidance of these publications should be used to hold accountable those examiners whose reports are deemed inadequate by the BVA.

The C&P Service also issues the M-21 and M-21R manual for claims examiners and adjudicators. Employees who rate claims improperly and not in compliance with the manuals and evidentiary development that is required should also be held accountable.

Issue 6

Length of time for remands to return to the BVA.

Recommendation

Create four Appeals Management Centers (AMC) to address only remanded claims. The locations of the AMCs will correspond to BVA Regions already in existence. This is an action item, with budgetary restrictions, for the Department of Veterans Affairs.

Rationale

Steering Committee Note: In FY 2005, 38.6% of all decisions rendered by the BVA were remanded to the VARO of original jurisdiction or to the Appeals Management Center in Washington. These 13,179 cases were remanded for improper C&P examinations, improper evidentiary development, or other administrative errors by DVA personnel. Each of these veterans have had the waiting time on their claim extended by at least one year due to the remand. Although we feel that the creation of new AMCs may speed up the adjudication process on remanded appeals, we cannot help but believe that holding the Rating Veteran Service Representative and the Veteran Service Center Manager accountable for doing their job right the first time would decrease the number of appeals and alleviate the need for four new AMCs.

Issue 7

Eliminate the backlog of compensation and pension claims at the DVA Regional Offices

Recommendation

Congress needs to approve mandatory funding for the DVA. This is an action item for the Congress.

Funding shall be adequate to ensure staffing levels and updated technology. This is an action item for the Congress, the Department of Veterans Affairs and the Office of Management and Budget.

Cross-jurisdictional processing of claims will assure adjudicating claims in 120 days or less on average. This is an action item for the Department of Veterans Affairs.

DVA moves to e-filing procedures in 3-5 years. This is an action item for the Department of Veterans Affairs.

Increase veteran's awareness of claims process. This is an action item for the Department of Veterans Affairs and the Veteran Service Organizations.

Rationale

Budgetary and funding issues have been discussed throughout this report. It is obvious to all of us that DVA needs additional

funding, additional personnel, and like any organization of its size, tighter controls on expenditures.

This particular issue has been a thorn in the side of all of us veterans, VSO employees and DVA employees alike. It has been discussed in the VA Claims Processing Task Force Report to the Secretary of Veterans Affairs chaired by a man who went on to become Under Secretary for Benefits. It has been discussed in both the House and Senate Committees on Veterans Affairs. It has been the subject of a number of bills offered by The Honorable Joe Baca, Member of Congress from California. Yet the backlog appears to get larger.

On the recommendation of E-filing: this is a project that was started a few years ago with the implementation of the Veteran's On-Line Application (VONAPP) web site. This program, like all electronic programs, is in a constant state of change. Today a veteran can file an application for disability compensation or pension through VONAPP. The application will not be complete, because as of yet the evidentiary documentation that is required, as a part of the claim cannot be sent electronically-yet. The veteran, also, cannot name a Veterans Service Organization as his/her representative via VONAPP – yet! As technology and cyber-security programs improve having the ability to file a completed claim electronically, this should be a priority plan for DVA's Information Technology staff.

Issue 8
Inadequate funding for DOD/DVA.

Recommendation

Steering Committee Note: This issue has been covered in other sections.

Mandatory funding for DVA. This is an action item for the Congress.

Issue 9
Non-standardization of physical examination by DOD and DVA.

Recommendation

DOD/DEERS and DVA compatible/standardization of physical and mental health examinations. This is an action item for the Departments of Defense and Veterans Affairs.

Rationale

A Memorandum of Agreement between the Department of Veteran Affairs and the Department of Defense on this subject was signed on 17 November 2004. The MOA targeted implementation of area Memorandums of Understanding between VA Medical Centers and Military Treatment Facilities at all Benefits Delivery on Discharge sites by 31 March 2005.

Issue 10
Non-standard electronic system across all branches compatible with DVA.

Recommendation

Electronic Military Medical/Personnel Records on an accessible electronic database and CD provided to personnel upon separation. This is an action item for the Departments of Defense and Veterans Affairs.

Rationale

This has been an ongoing concern of the DOD/DVA Joint Executive Council, the Veterans Service Organizations, the Chairman of the House Committee on Veterans Affairs and other concerned stakeholders for some time. In order for "Seamless Transition" to work, DOD and DVA must develop compatible software programs that will enable the service branches, VBA, and VHA electronic information systems to interface with each other.

Issue 11
Military does not have in place a system recording every occurrence of medical treatment (i.e. civilian care, repeat treatments not tracked).

Recommendation

All Federal military organizations should have electronic medical record access to include non-military treatment. This is an action item for the Department of Defense.

Rationale

HIPPA regulations will not allow military medical personnel to access a service member's civilian health care treatment records without the member's written consent. These are the same regulations that require a veteran to sign a request for DVA to acquire civilian treatment records when developing a compensation or pension claim.

Issue 12

Military waving the bone.

Recommendation

Continued Education: benefits implemented upon active duty.

Service organizations (i.e. national, state, and county VSOs)

Rationale

Issues Chairman Note: This issue appears to be built around members of the various military recruiting commands "selling" benefits to prospective recruits to entice them to enter the service.

Issue 13

Medical records not being provided before separation.

Recommendation

Steering Committee Note: This recommendation is covered as part of Issue 12 under Health Care.

CD provided to personnel upon separation. This is an action item for the Department of Defense.

Issue 14

Duty To Assist Letter.

Recommendation

Reduce turn-a-around time to less than 30 days.

Rationale

The Under Secretary for Benefits, in his testimony before the Senate Committee on Veterans Affairs on 26 May 2005, stated "a recent law dramatically changed the business of VA disability claims adjudication. This legislation was the Veterans Claims Assistance Act of 2000 (VCAA). One of its central provisions clarified and enhanced VA's "duty to assist" veterans with their benefit claims. In my opinion, this was a proper and well-conceived law that addressed a deficient process under which VA was previously adjudicating claims. That law clearly defined VA's responsibilities for assisting claimants. It made our adjudicators absolutely responsible for helping each individual veteran know what to do, what is needed to substantiate his/her claim, and how to respond. It also requires that we tell the veteran what we will do to assist him or her." The Veterans Claims Assistance Act of 2000, codified at Title 38, United States Code, Chapter 51, states that "Upon receipt of a complete or substantially complete application, the Secretary shall notify the claimant and the claimant's representative, if any, of any information, and any medical or lay evidence, not previously provided to the Secretary that is necessary to substantiate the claim..." The implication of the phrase "Upon receipt..." cannot be made any clearer. As soon as the claims development team receives the claim they need to send the Duty to Assist letter without delay.

Issue 15

Lack of education to military personnel on DVA benefits.

Recommendation

Veterans need education throughout military career, and upon separation, on medical records and veteran benefits. This is an action item for the Department of Defense.

Rationale

This should be a combined effort between the unit training NCO, the installation TAP coordinator, and the DVA representative on the installation (if there is one).

Issue 16
DVA loses a lot of paperwork.

Recommendation

Internal audit of all levels of DVA, best practices shared. This is an action item for the Department of Veteran Affairs.

Rationale

The USDVA has a number of protocols in place to keep track of claim files, incoming correspondence, packages, and other resources. However, the best protocol is worthless if the organization's staff does not comply with it and management tolerates the non-compliance. The Regional Office Director or Service Center Manager should be held accountable for the loss of documents, mail, or files.

Issue 17
Standardization within DVA Review Offices.

Recommendation

Internal audit of all levels of DVA, best practices shared. This is an action item for the Department of Veterans Affairs.

Rationale

There are 57 VA Regional Offices around the world. Each RO Director is in a quasi-autonomous position. It is to be expected that no single RO will be a mirror image of another. Additionally, standardization is a much sought after goal, especially when it comes to claims adjudication. The issue is that claims adjudicators tend to rate subjectively not objectively. That's part of the human psyche and will probably never change. In the meantime, it is the responsibility of DVA leadership to continue to strive for that elusive goal. Internal audits and "Best Practices" sharing are the way to do it.

Issue 18
The Court of Appeals for Veterans Claims (CAVC) has not been granted the jurisdiction to review factual determinations other than on a "clearly erroneous" basis. The Court should not be required to grant deference to the Board of veteran Appeals (BVA) decision-making. The Court should be expected and required to weight the evidence de novo.

Recommendation

The Court needs to be granted the authority to make its own findings of fact based on the entire record. This is an action item for the Congress.

Rationale

Title 38, United States Code, Chapter 72 governs the Court of Appeals for Veterans Claims. Section 7252 of the title states that "The Court of Appeals for Veterans Claims shall have exclusive jurisdiction to review decisions of the Board of Veterans' Appeals. The Secretary may not seek review of any such decision. The Court shall have power to affirm, modify, or reverse a decision of the Board or to remand the matter, as appropriate." However, Section 7261 states that "In no event shall findings of fact made by the Secretary or the Board of Veterans' Appeals be subject to trial de novo by the Court."

Issue 19
Too many cases are before the Court because of inadequate issue and evidentiary development throughout the process beginning with the filing of the claim. In FY 2005, 3,466 cases were appealed to the CAVC. CAVC decided 1,905 cases in FY 2005. 45% were remanded to the DVA. This delays the final adjudication of the claim, and puts further strain on the system. Some veterans never receive a final resolution before they die.

Recommendation

Better advocacy training for Veterans' Claim Representatives, as well as, legal representation at the BVA. This is an action item for the Court of Appeals for Veteran Claims, the Department of Veterans Affairs, and all organizations employing veterans service officers.

Rationale

Although this issue will be discussed in greater depth in another section of this report, it is important to note that better training, quality training, and continuing education requirements for all personnel dealing with veteran claims will result in a better product and a higher percentage of satisfied veterans.

Issue 20

Multiple issues in an appeal should be reviewed individually and completely before the case is returned to BVA.

Recommendation

All case issues need to be decided individually; those decisions that are favorable to the claimant need to be entered of record. Remand only those issues that the Court cannot decide.

Rationale

38 USC 7261 appears to give the Court the latitude to review each issue individually in that the statute directs the Court to “(1) decide all relevant questions of law, interpret constitutional, statutory, and regulatory provisions, and determine the meaning or applicability of the terms of an action of the Secretary; (2) compel action of the Secretary unlawfully withheld or unreasonably delayed; (3) hold unlawful and set aside decisions, findings (other than those described in clause (4) of this subsection), conclusions, rules, and regulations issued or adopted by the Secretary, the Board of Veterans’ Appeals, or the Chairman of the Board found to be— (A) arbitrary, capricious, an abuse of discretion, or otherwise not in accordance with law; (B) contrary to constitutional right, power, privilege, or immunity; (C) in excess of statutory jurisdiction, authority, or limitations, or in violation of a statutory right; or (D) without observance of procedure required by law; and (4) in the case of a finding of material fact adverse to the claimant made in reaching a decision in a case before the Department with respect to benefits under laws administered by the Secretary, hold unlawful and set aside or reverse such finding if the finding is clearly erroneous.

Issue 21

CAVC does not effectively communicate with Congress or the VA in the annual report. The report is not appropriately detailed regarding the issues that are continuously before the court.

Recommendation

The Court’s annual report should address recurring deficiencies of claims adjudication and identify systemic problems that must be corrected.

Rationale

As there is no requirement for an annual report to Congress in 38 USC 72, the Chief Judge apparently has the authority to report any information that he feels would be in the best interests of the Court. However, pointing out recurring deficiencies and systemic problems is in the best interest of the Court, as well as the entire veterans advocacy system.

Issue 22

Inexperienced DROs are making decisions.

Recommendation

Newly assigned DROs who have lack of experience in the position should be trained to include familiarity with all guidelines commensurate with their job title. This is an action item for the Department of Veterans Affairs.

Assigned DRO shall familiarize themselves with the service organizations in the regional office and create a professional working environment. This is an action item for the Department of Veterans Affairs and the Veterans Service organizations.

Rationale

Newly assigned Decision Review Officers should spend at least six months working with a mentor before being allowed to perform the duties of a Decision Review Officer without direct and immediate supervision. The fact is that whatever decision is made by a DRO will have a significant impact on the life of an individual or a family.

The second recommendation is actually a “two way street”. Veterans Service Officers co-located in DVA facilities where a DRO is employed should assist the DRO in learning about the Veteran Service Organization, its goals and objectives, and how it handles veteran claims.

Issue 23

DROs are not accountable for the number of cases going to the BVA.

Recommendation

The DRO should be subjected to an external review process. This is an action item for the Department of Veterans Affairs.

Performance requirements for the DRO must reflect the ratio of cases remanded or overturned by the BVA to the total number of cases referred. This is an action item for the Department of Veterans Affairs.

Rationale

In any environment in which an individual must face performance requirements and performance evaluations, both the positive and the negative areas of his/her performance need to be evaluated. If one DRO has a significantly higher ratio of claims being sent on to the Board of Veterans Appeals and those claims are being overturned or remanded at a higher rate than those of his/her peers, action must be taken.

Issue 24**Lack of informed claimants.****Recommendation**

Claimant should be strongly encouraged to seek out a veteran advocate. This is an action item for the Veterans Service Organizations.

DRO should be pro-active in maintaining a line of communication with the veteran and/or veteran advocate. This is an action item for the Department of Veterans Affairs.

Rationale

All veterans who file claims with the Department of Veterans Affairs must be reminded, by the Veteran Service Organizations, that they are actually filing a legal claim for redress against the United States of America. To do so without a professional to provide advice is foolish. Whether that professional is a service officer employed by state or county government, a service officer employed by a veteran's group, or an attorney is not relevant. The fact that a professional is retained is relevant.

The second recommendation is also a legal requirement. When a veteran signs an agreement (VA Form 21-22, Appointment of Veterans Service Organization as Claimant's Representative), he/she is signing a limited power-of-attorney, as spelled out on the form ("I, the claimant named in Items 1 or 7, hereby appoint the service organization named in Item 3A as my representative to prepare, present and prosecute my claim for any and all benefits from the Department of Veterans Affairs based on the service of the veteran named in Item 1. I authorize the Department of Veterans Affairs to release any and all of my records, to include disclosure of my Federal tax information (other than as provided in Items 12 and 13), to that service organization appointed as my representative. It is understood that no fee or compensation of whatsoever nature will be charged me for service rendered pursuant to this power of attorney. I understand that the service organization I have appointed as my representative may revoke this power of attorney at any time, subject to 38 CFR 20.608."). The DRO, or any DVA employee, having any communication with the veteran and not the veteran's representative is quite possibly in violation of the law.

Issue 25**Heavy DRO workload.****Recommendation**

Appoint acting DROs to assist with backlog when backlog exceeds a specified number of months. This is an action item for the Department of Veterans Affairs.

Use of overtime for DROs when backlog exceeds a specified number of months. This is an action item for the Department of Veterans Affairs.

Request DROs from other regional offices when there is a backlog. This is an action item for the Department of Veteran Affairs.

Rationale

Steering Committee Note: The Symposium Steering Committee cannot endorse the first recommendation of this issue for the simple reason that it is in conflict with the first recommendation of Issue 22 in this chapter. The Committee also has concerns about the second recommendation of this issue. According to the VBA on Duty Report for 31 Dec 2005, all Decision Review

Officers are generally supervisory personnel in grade GS-0996-13. As such they are not authorized overtime. Although the phraseology is apparently not quite correct, the concept of DROs working until the assigned task is completed is understood and concurred in.

Request DROs be detailed from other VA Regional Offices for a short period of time is the preferred solution to this issue. The downside is that the workload will increase at the temporarily assigned DROs home station while he/she is on detail.

Issue 26

Standard protocol for selection and hiring of Veteran Service Officers.

Recommendation

There should be a standard protocol for selecting and hiring Veteran Service Officers (VSO). This is an action item for the Department of Veterans Affairs, state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

Every VSO should be a veteran. This is an action item for state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

Accreditation should be mandatory for all volunteer and paid VSOs. This is an action item for the Department of Veteran Affairs, state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

Recognition of past experience should be emphasized with a six-month mentoring program for new VSOs. This is an action item for state departments of veteran affairs, county veteran service officers, and Veteran Service Organizations.

Rationale

Selecting and hiring Veteran Service Officers is a matter for the employing agency; however, accrediting these individuals is a matter for the General Counsel of the USDVA and is laid out in Title 38, Code of Federal Regulations, Part 16.

Steering Committee Note: The second recommendation is a case where the Committee agrees with the sentiment of the concept but not the practicality. We would suggest the recommendation read, "A veteran service officer shall be either a veteran or the surviving spouse of a veteran or the spouse of a 100% totally disabled service-connected veteran."

Issue 27

Education/Funding/Knowledge.

Recommendation

Create a standardized computer-based training program for all VSOs. This program should be updated at least semi-annually. This is an action item for the Department of Veterans Affairs, state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

All VSOs should have access to the DVA Advisor training program. This is an action item for the Department of Veteran Affairs, state departments of veteran affairs, county veteran service officers, and Veteran Service Organizations.

All prerequisites to receive "Training, Responsibility, Involvement, and Preparation of Claims (TRIP)" training from DVA must be completed before receiving access to any further training programs. This is an action item for the Department of Veteran Affairs, state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

Rationale

There are mixed standards of training throughout the veteran advocacy profession. Each organization has its own standards and procedures. It is imperative that the Congress and the Department of Veterans Affairs mandate a training program that consists of classroom training with a written examination, supervised-on-the-job training for a defined period of time, and an annual continuing education requirement. Currently, the two most respected organizations for the classroom portion of the training are the National Association of County Veteran Service Officers (NACVSO) and the National Veterans Legal Services Program (NVLSP). Both of these organizations have the capability of creating a computer-based training program as well.

The DVA Advisor program may only be run from a computer that is part of the USDVA computer system. DVA should allow free access to this program.

Issue 28

Research & Development of an electronic program for the submission of a ratable claims package to include Power of Attorney for Veteran Service Officers and all supporting documents.

Recommendation

Steering Committee Note: This recommendation is covered under Issue 7 of this chapter.

Research and development should be explored on the potential to electronically file a ratable claims package. This filing should include the ability to scan and electronically sign all supporting documents needed to adjudicate the claim. This is an action item for the Department of Veterans Affairs, state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

Issue 29

The importance of collecting and utilizing information.

Recommendation

All VSOs should be provided instructions for accessing the DVA database due to the importance of collecting and utilizing information. This is an action item for the Department of Veteran Affairs, state departments of veteran affairs, county veteran service officers, and Veterans Service Organizations.

Rationale

This is/should be part of the curriculum for TRIP training. One of the primary functions of a veteran service officer is claims development. The veteran service officer based in a VA Regional Office or VA Benefits Office should be allowed to input the information they have developed or acquired on a specific case.

Issue 30

Mandatory funding for Veteran Service Officers based on need, not political agendas.

Recommendation

For the purpose of providing sufficient staffing, mandatory funding for the VSO should be based on veteran needs, not political agendas. This is an action item for state departments of veterans affairs, county veteran service officers, and Veteran Service Organizations.

Issue 31

Service Officers should attend Family Readiness Groups.

Recommendation

Service Officers should attend National Guard/Reserve Family Readiness groups, minimizing the generation and demographic gaps between service officers and the younger generation of veterans. This is an action item for the Department of Veteran Affairs, National Guard Bureau, state departments of veterans affairs, county veteran service officers, and Veterans Service Organizations.

Rationale

This is already being done by AMVETS in a number of states. In other states the state department of veteran affairs handles these functions, either themselves or with Veterans Service Organizations.

Issue 32

The continuance of Symposiums dedicated to Veteran's Affairs.

Recommendation

The Symposium should continue on an annual basis with expansion to include more veterans, Veteran Service Officers, Veterans Service Organizations, and public/government agencies.

**Issue 33
Payments**

- Delayed payments are causing financial hardship to the student.
- Payment rate-inflation and rise of cost of education are not being met with matching payment increases.

Recommendation

The DVA be given adequate funding for technology and staffing so that MGIB claims will be paid within 35 days. This is an action item, with budgetary constraints, for the Department of Veterans Affairs.

Support the Total Force GI Bill concept.

Rationale

In the FY 2007 Budget Submission, USDVA requested an increase of 46 Full Time Employees and \$3.94 million over FY 2006.

**Issue 34
Process**

- Applications/Claims are not being processed in a timely fashion (currently taking a minimum of 11 to 13 weeks).
- The toll-free number and "Right Now Web" are not effective.
- Only four understaffed Regional Processing Offices (RPO) process MGIB claims.
- School Certifying Officials (SCO) are not adequately trained to process MGIB Claims.

Recommendation

DVA to pay for SCO annual training. This is an action item, with budgetary constraints, for the state departments of veterans affairs.

Steering Committee Note: The following recommendation has been addressed in Issue 33 of this chapter.

Provide adequate staffing for the four RPOs. This is an action item, with budgetary constraints, for the Department of Veterans Affairs.

Steering Committee Note: The Steering Committee appreciates the work and effort expended by the members of the Benefits work groups. Although we will look at the following areas from time to time in the future, at this point we do not intend to pursue them as we feel the recommendations listed below have been resolved. Amplification is included in the rationale.

Create a functional/effective system (web and toll-free number) which allows an individual to register a complaint which requires immediate action be taken. In addition, create a tracking system that complies the complaints. This is an action item for the Department of Veterans Affairs.

Rationale

School Certifying Officials are employees of the State Approval Authority which are subsidiaries of the various state departments of veterans affairs in most states.

Steering Committee Note: The Department of Veterans Affairs has a GI Bill web site located at <http://www.gibill.va.gov/>, the toll free telephone number is 1-888-442-4551.

**Issue 35
MGIB Limitations**

- Transferability of MGIB benefits
- 10 year delimiting date
- 36 months
- Included as "income" when applying for Pell Grant

Recommendation

Allow MGIB benefits to be transferred to spouse and children. This is an action item for the Congress.

Remove the ten-year delimiting date. This is an action item for the Congress.

Increase the MGIB entitlement from 36 to 48 months. This is an action item for Congress.

Exclude MGIB as a resource when calculating Federal Financial Aid. This is an action item for Congress.

Rationale

The recommendations outlined above would require a rewrite of Title 10, United States Code, Subtitle E, Part 4, Chapter 1606; Title 20, United States Code, Chapter 28, Sub-chapter IV, Part E, Sections 1087vv(b)(4) and 1087vv(c); Title 38, United States Code, Part III, Chapter 32; and Title 38, United States Code, Part III, Chapter 36, Section 3695.

The transfer of benefits from the service member to a dependent was addressed in H.R. 3695 on 29 Jul 2005 by The Honorable Roscoe G. Bartlett, Member of Congress from Maryland. The bill has not moved from the House Committees on Veterans Affairs and Armed Services since August and September 2005, respectively.

Issue 36

Disparity between the Select Reserve and Active Duty MGIB

- Pay rates discrepancies
- Multiple deployment times are not cumulative for 1607
- When 1607 claims are processed the VA system creates an overpayment letter if the member was receiving 1606.

Recommendation

Establish a fixed percentage between the Select Reserve and the Active Duty MGIB. This is an action item for Congress.

Make multiple deployment times cumulative for 1607. This is an action item for Congress.

Discontinue sending overpayment letters when processing 1607 claims. This is an action item for the Department of Veterans Affairs.

Rationale

The recommendations outlined above would require a rewrite of Title 10, United States Code, Subtitle E, Part 4, Chapters 1606 and 1607.

Issue 37

\$1200 Contribution

- Required
- Not refundable

Recommendation

Eliminate the \$1,200 contribution. This is an action item for Congress.

Rationale

In accordance with 38 USC 3222, contributions are limited to \$2,700 vice the \$1,200 specified in the recommendation. Contributions are refundable as per 38 USC 3223.

The Montgomery GI Bill is a matching funds program in which the Department of Defense matches the service member's contribution at a ratio of 2:1. A participating service member may elect to contribute between \$25 and \$100 per month, in \$5 increments, but not to exceed \$1,200 in a given year.

Issue 38

A person with a General Discharge Under Honorable Conditions is not allowed to claim GI Bill benefits.

Recommendation

Steering Committee Note: The Steering Committee appreciates the work and effort expended by the members of the Benefits work groups. Although we will look at the following area from time to time in the future, at this point we do not intend to pursue it as we feel the recommendation listed below has been resolved. Amplification is included in the rationale.

Allow MGIB Benefits for all service members discharged under honorable conditions. This is an action item for the Congress.

Rationale

Steering Committee Note: 38 USC 3202 states "The term "eligible veteran" means any veteran who is not eligible for educational assistance under chapter 34 of this title and who (i) entered military service on or after January 1, 1977, and before July 1, 1985, served on active duty for a period of more than 180 days commencing on or after January 1, 1977, and was discharged or released there from under conditions other than dishonorable, or (ii) entered military service on or after January 1, 1977, and before July 1, 1985, and was discharged or released from active duty after January 1, 1977, for a service-connected disability."

Issue 39

Transition from military to campus life

- Study skills, age, financial, family issues and responsibilities, physical, faculty (anti-war), other student perceptions
- School support system/programs (student affairs, counselors, VA associations). Schools that do not have a VA office need to provide services.
- Not all schools react the same to late payments (promissory notes).

Recommendation

No recommendation submitted.

Issue 40

TAP is only available within a limited window of opportunity (180 days prior to separation) and location (only at active duty bases).

- Often transitioning veterans, whose minds are on going home, are not of a mindset to be receptive to the TAP initiative.
- Veteran demand exceeds capabilities of limited staff and resources (equipment, locations, instructors, computer based initiatives).
- Not available once separated from service.
- Lack of coordination with sister service TAP programs.
- No virtual process in place.
- Lack of command support.
- No central coordination of separating service members within a geographical area.
- TAP classes/instructors not mobile.

Recommendation

More instructors. This is an action item for the Departments of Defense, Homeland Security, Labor, and Veterans Affairs.

Increased funding. This is an action item for the Department of Defense.

Virtual program (TAP for life). This is an action item for the Departments of Defense, Homeland Security, Labor, and Veterans Affairs.

Develop portable programs. This is an action item for the Departments of Defense, Homeland Security, Labor, and Veterans Affairs.

Steering Committee Note: The Steering Committee appreciates the work and effort expended by the members of the Health care work groups. Although we will look at the following areas from time to time in the future, at this point we do not intend to pursue them as we feel the recommendations listed below have been resolved. Amplification is included in the rationale.

Open enrollment for all veterans, including post separations. This is an action item for the Departments of Defense, Homeland

Security, Labor, and Veteran Affairs.

More locations. This is an action item for the Department of Defense.

Mandate command support. This is an action item for the Department of Defense.

Partner with other federal/state/local programs. This is an action item for the Departments of Defense, Homeland Security, Labor, and Veterans Affairs.

Provide Federal/state coordination. This is an action item for the Departments of Defense, Homeland Security, Labor, and Veterans Affairs.

Rationale

Steering Committee Note: Department of Defense Directive 1332.35 mandates the following: "...Transition services (as defined in item E1.1.4. of enclosure 1) to be provided to Service members and their families for up to 90 days after separation, space and work load permitting... High quality transition counseling and employment assistance programs are established on military installations with more than 500 Service members permanently assigned or serving at that installation." Chief of Naval Operations Instruction 1900.2A (Other services similar) Delivery of these services to all Navy personnel will be achieved through a cooperative effort involving the Department of Defense (DOD), U.S. Department of Labor (DOL), and Department of Veterans Affairs (DVA), as well as many State, community, and non-profit service organizations.

Although the Department of Defense has also mandated that those remote stations with less than 500 personnel send their personnel their personnel TAD/TDY to the nearest TAP site, regardless of branch of service, a mobile TAP program should be provided. This program could include TAP personnel traveling to fleet units, including the Fleet Marine Force, that are deployed with the United States Sixth and Seventh Fleets.

Issue 41

Currently there is no measuring the effectiveness of TAP in meeting the future needs of the service member.

- No formal analysis of veteran’s needs.
- No follow up with veteran after separation.
- No measure of participation by components/branches.
- No measure of job placement rate.
- No definition of finished product (i.e. resume, interview skills, job search readiness).
- No national oversight of the benchmarks.
- Without verifiable data, you cannot justify solutions or make adjustments.

Recommendation

Create and conduct formal follow-up program. This is an action item for the Department of Defense.

Create and conduct on-going measurement. This is an action item for the Department of Defense.

Define standards of success. This is an action item for the Department of Defense.

Create a TAP accreditation program. This is an action item for the Department of Defense.

Make measurement data available to program coordinators. This is an action item for the Department of Defense.

Steering Committee Note: The Steering Committee appreciates the work and effort expended by the members of the Health care work groups. Although we will look at the following areas from time to time in the future, at this point we do not intend to pursue them as we feel the recommendations listed below have been resolved. Amplification is included in the rationale.

Create and conduct pre-TAP needs assessment. This is an action item for the Department of Defense.

Make program mandatory to all service members (therefore no need for measurement). This is an action item for the Department of Defense.

Rationale

Steering Committee Note: Chief of Naval Operations Instruction 1900.2A (Other services similar) Delivery of these services to all Navy personnel will be achieved through a cooperative effort involving the Department of Defense (DOD), U.S. Department of Labor (DOL), and Department of Veterans Affairs (DVA), as well as many State, community, and non-profit service organizations.

How do we create a program for our military personnel, mandate that all personnel attend the program, and not have a methodology of measuring the success of the program? It is imperative that the Executive Departments involved in TAP define success, create a way to measure that success, measure that success, and share the data.

Issue 42

All levels of service providers are not consistently applying regulations based on current federal guidelines, specifically at state and local levels (i.e. inconsistent diagnosis of veterans' disabilities, program eligibility, etc).

Recommendation

Provide mandatory funding for standardization training, education and oversight to ensure that regulations are applied consistently at all levels and locations. This should include VA-approved accreditation for all those who provide guidance, who disseminate information, and who are in direct contact with veterans and their families. This is an action item, with budgetary constraints, for the Congress and the Department of Veterans Affairs.

Rationale

In its FY 2007 Budget Submission, the USDVA has requested an increase of 130 Full Time Employees and an increase of \$4.2 million over FY 2006. Unfortunately, the Vocational Rehabilitation portion of the Veterans Benefits Administration is still in its discretionary appropriation. "The purposes of this chapter are to provide for all services and assistance necessary to enable veterans with service-connected disabilities to achieve maximum independence in daily living and, to the maximum extent feasible, to become employable and to obtain and maintain suitable employment." (38 USC 3100)

Issue 43

Some regulations are subjectively interpreted while others are too restrictively defined to meet the current needs of veterans; timelines are restrictive; certain needs are not accounted for; and application instructions are unclear.

Recommendation

Remove eligibility time restraints and service time limits from the current regulations in order to provide lifetime access to benefits. This is an action item for the Department of Veterans Affairs and will require Congressional action.

Rationale

In accordance with 38 USC 3103, an eligible veteran has a period of twelve (12) years from separation from service to complete a vocational rehabilitation program. However, the "clock" doesn't actually start running until such time as the veteran has established a service-connected disability rated at 10% or more. The Secretary of Veterans Affairs also has the ability to waive the time constraint in certain other situations.

Issue 44

Current funding is not mandatory; caps and quotas are limiting the availability and usage of services; local resources are not adequately funded.

Recommendation

Realign funding for resources and personnel to meet the geographic distribution of veterans. Eliminate funding caps and quotas, implement mandatory funding regardless of the type of disability. This is an action item, with budgetary constraints, for the Department of Veterans Affairs.

Rationale

As discussed in Issue 42 of this chapter, vocational rehabilitation is currently funded through a discretionary appropriation.

Issue 45

There is a lack of training and knowledge for providers and veterans on specific disabilities, program details, the

appeals process, and veterans' entitlements.**Recommendation**

Require VA representatives to make direct contact with each veteran upon determination of VocRehab eligibility in order to provide counseling on educational benefits. This is an action item for the Department of Veterans Affairs.

Rationale

Under the current policy, once the veteran has established that there is a service-connected disability, DVA will send the veteran a letter advising him/her of the vocational rehabilitation program. Unless the veteran contacts the DVA nothing else is done. Many of the DVA forms and applications and form letters are not "user friendly". If a veteran who is deemed eligible to apply for VocRehab has not responded to the VocRehab contact letter within a specific time frame, the VR&E staff should contact the veteran directly and discuss the program with the veteran.

Issue 46

Current programs and services fail to initially meet and continually evaluate the complex and specialized needs of veterans and families.

Recommendation

Determine benefits by a specific illness or disability and not by a generic rating percentage or service-connected condition. Transfer educational benefits to the primary caregiver if/when the veteran has been determined unable to utilize the services. This is an action item for the Department of Veterans Affairs and will also require Congressional action.

Rationale

There are a number of situations where veterans may be rated as 50%, or more, service-connected disabled and are perfectly capable of seeking and acquiring employment without assistance from the VR&E staff. There are also a number of situations where a veteran may hold a much lower disability rating, but cannot acquire employment without training and assistance. VR&E, in conjunction with the veteran and the veteran's family or caregiver, should make a joint determination regarding the veteran's ability to enroll in and complete a VR&E program.